

Request for Proposal

Employee Assistance Program



**Issued by
The State of Delaware
The State Employee Benefits Committee**

&

Aon Consulting

September 28, 2009

I. Administrative Information

The State Employee Benefits Committee (SEBC) of the State of Delaware is seeking proposals from EAP vendors to provide an Employee Assistance Program for the State of Delaware effective July 1, 2010. This Request for Proposal (RFP) is issued pursuant to Title 29 Delaware Chapter 69 Sect. 6981 and 6982.

The SEBC currently offers EAP benefits to roughly 40,000 employees and covered individuals who are participants in the Group Health Insurance Program. The State of Delaware's EAP is governed by the SEBC. Human Management Services, Inc. (HMS, Inc.) has provided EAP services to the State since 2004.

Overview

The State Employee Benefits Committee (SEBC) is chaired by the Office of Management and Budget Director. The Controller General, Insurance Commissioner, State Treasurer, Secretary of Health and Human Services, Secretary of Finance and Chief Justice of the Supreme Court comprise the remainder of the Committee.

The EAP benefit is designed to assist eligible employees and covered individuals with marital or family problems, divorce/separation, parenting, emotional issues, child or elder care, legal and financial assistance, depression, interpersonal conflicts, substance abuse, stress management, anger, grief and loss, and identity theft. Details of the current plan are provided in Exhibit A.

The proposal must conform to the requirements of the Proposal Procedures and Required Information Sections of the RFP. The SEBC specifically reserves the right to waive any informalities or irregularities in the proposal format. Each proposal must be accompanied by a cover letter which briefly summarizes the proposing firm's interest in providing the required professional services. The cover letter must also clearly state and justify any exceptions/deviations to the requirements of the RFP, which the applicant may have taken in presenting the proposal. The SEBC reserves the right to deny any and all exceptions taken to the RFP requirements. RFP information can be obtained by emailing Finale Uptegrow, Management Analyst, directly at finale.uptegrow@state.de.us or by downloading the document from the Government Support Services website at <http://gss.omb.delaware.gov/bids.shtml>.

The SEBC reserves the right to reject any and all proposals and award contracts to more than one vendor.

Aon's Role

The SEBC has retained Aon Consulting to prepare these specifications, analyze all proposals, and participate with the Proposal Review Committee (PRC) to make recommendations to the SEBC for this proposal. The SEBC does not pay a commission to a broker or agent for the administration of its health plans. Therefore, all proposals must be quoted net of commissions.

Proposal Objectives

The SEBC wants to accomplish at least the following objectives with the Employee Assistance Program:

- Ensure competitive cost
- Improve employee satisfaction
- Provide an EAP with, at minimum, the existing benefit levels
- Provide program enhancements at no cost
- Establish performance targets to assess and monitor vendor's performance

Selection Criteria

The SEBC is committed to offering high quality benefit programs. Listed below are the primary selection criteria that will enter into the decision-making process.

↳ **Account Considerations**

- Acknowledgment of existing clients of like size
- Acknowledgment of existing clients in the public sector
- Number of EAP clients, number of covered employee lives and revenue derived from EAP services

↳ **Cost Considerations**

- Competitive program costs
- Willingness to offer unlimited training hours, to be allocated at the discretion of the SEBC
- Willingness to enter into performance agreements based on agreed upon service levels

↳ **Network Superiority**

- Availability of high quality, competitively priced EAP networks
- Accessible panel consisting of providers of choice, including geographically dispersed certified EAP counselors, certified addiction counselors, and other behavioral health practitioners
- Effective triage system
- Acknowledgment by vendor's current clients that provider networks and utilization management meet or exceed expectations
- Proven network management capabilities

↳ **Benefit Provisions**

- Ability to provide the requested benefit plan design

↳ **Administrative Services**

- Dedication to delivering superior member and customer service support
- Willingness to provide dedicated staff for account management purposes
- Strong management support protocols/resources and mandatory referral process
- Evidence of an organized approach to program implementation (project management)

Proposal Process

For related questions or concerns regarding this RFP please only contact Finale Uptegrow of the Statewide Benefits Office (contact information listed below)

The SEBC reserves the right to:

- Reject any or all proposals tendered;
- Negotiate exclusively with one or more vendors of choice; and/or
- Terminate or modify the process at any time.
- Award to multiple vendors

Proposals and Timetable

The following timetable is expected to apply during this marketing effort.

NOTE: The SEBC reserves the right to adjust this schedule as it deems necessary

Event	Target Completion Date
Release of RFP	9/28/2009
Submission of questions and confirmation to bid	10/19/2009
Deadline for submission of proposals	11/02/2009 by 2 P.M. EST
Finalist presentations	12/2009
Selection of finalist	1/2010
Effective date	7/1/2010

If deemed necessary by the PRC, some or all proposing firms may be asked to make finalist presentations in Dover, Delaware. All such presentations will be at the expense of the proposing firm.

Three (3) paper proposals and two (2) electronic copies (PDF and Word format) copied onto a thumb drive (jump drive) should be sent to the following location on or before 2 P.M. EST November 2, 2009. Electronic responses must contain scanned images of any requested signatures. Proposals received after 2 P.M. EST **will not** be considered.

Finale Uptegrow
Management Analyst, Statewide Benefits Office
Office of Management and Budget
500 W. Loockerman Street, Suite 320
Dover, DE 19904
Tel: 302-739-8331
Fax: 302-739-8339
E-mail: finale.uptegrow@state.de.us

All questions are to be directed to Finale Uptegrow. It is the Bidders' responsibility to ensure that their proposals arrive on or before the specified date and time.

Employee Census

Census data will be provided by Finale Uptegrow to vendors submitting a confirmation to bid.

Proposal Format

Vendor's Errors/Omissions

The SEBC nor Aon Consulting will be responsible for errors or omissions made in your proposal. You will be permitted to submit only one proposal. You may not revise or withdraw submitted proposals after the applicable deadline. After that, revisions to your original submission will not be allowed except as requested by Aon Consulting or the SEBC. Therefore, please make your bid sound and competitive.

Completeness

We ask that your proposal be complete and that it comply with all aspects of these specifications. Any missing information could disqualify your proposal. ***Unless you note to the contrary, we will assume that your proposal conforms to our specifications in every way.***

Modifications

The SEBC reserves the right to issue amendments or change the timelines to this RFP. All firms provided with a copy of the RFP would be notified in writing of any modifications made by the SEBC to this RFP.

Incurred Costs

This RFP does not commit the SEBC to pay any costs incurred in the preparation of a proposal in response to this request, and Bidder agrees that all costs incurred in developing its proposal are the Bidder's responsibility.

Improper Consideration

Bidder shall not offer (either directly or through an intermediary) any improper consideration such as, but not limited to, cash, discounts, service, the provision of travel or entertainment, or any items of value to any officer, employee, group of employees or agent of the SEBC in an attempt to secure favorable treatment or consideration regarding the award of this proposal.

Finalist Presentation

The SEBC may require each of the finalists to make presentations in Dover, Delaware. All such presentations will be at the expense of the proposing firm.

Procedures and Required Information

A. Procedures

Proposal Review Committee (PRC)

The PRC shall be comprised of representatives from each of the following offices: Office of Management and Budget; Controller General's Office; Department of Finance; Department of Health and Social Services; State Insurance Commissioner's Office; State Treasurer's Office and the Chief Justice of the Supreme Court. The PRC shall determine the firms which meet the minimum requirements pursuant to selection criteria of the RFP and procedures established in 29 Del.C. §6981 and 6982. The PRC shall interview at least one of the qualified firms.

The PRC shall make a recommendation regarding the award to the SEBC who shall have final authority, in accordance with the provisions of this RFP and 29 Del.C. §6982, to award a contract to the successful firm or firms as determined by the SEBC in its sole discretion to be in the best interests of the State of Delaware. The SEBC may negotiate with one or more firms during the same period and may, at its discretion, terminate negotiations with any or all firms.

Proposals

Proposals must be submitted in writing (three original copies) and electronically (one PDF copy and one Word Processing document copy) with appropriate certification signatures as indicated.

In preparing your written response to any RFP question or request for information, repeat each question or requirement followed by your response.

Please provide complete answers and explain all issues in a concise, direct manner. If you cannot provide a direct response for some reason (e.g. your company does not collect or furnish certain information), please indicate the reason rather than providing general information that fails to answer the question. **"Will discuss"** and **"will consider"** are not appropriate answers. All information requested is considered important. If you have additional information you would like to provide, include it as an appendix to your proposal.

The SEBC will use the information contained in your proposal in determining whether you will be selected for contract negotiations. The proposal the SEBC selects will be a working document. As such, the SEBC will consider the proposal an integral part of the contract and will expect the proposing firm to honor all representations made in its proposal.

It is the proposing firm's sole responsibility to submit information relative to the evaluation of its proposal and the SEBC is under no obligation to solicit such information if it is not included with the proposing firm's proposal. Failure of the proposing firm to submit such information in a manner so that it is easily located and understood may have an adverse impact on the evaluation of the proposing firm's proposal.

Confidentiality of Documents

The Office of Management and Budget (OMB) is a public agency as defined by state law, and as such, it is subject to the Delaware Freedom of Information Act, 29 *Del. C.* Ch. 100. Under the law, all the State's records are public records (unless otherwise declared by law to be confidential) and are subject to inspection and copying by any person. Proposing firms are advised that once a proposal is received by the State and a decision on contract award is made, its contents will become public record and nothing contained in the proposal will be deemed to be confidential except proprietary information.

Proposing firms should not include any information in their proposal that is proprietary in nature or that they would not want to be released to the public. Proposals must contain sufficient information to be evaluated and a contract written without reference to any proprietary information. If a proposing firm feels that they cannot submit their proposal without including proprietary information, they must adhere to the following procedure or their proposal may be deemed unresponsive and will not be recommended for selection. **Proposing firm must submit such information in a separate, sealed envelope labeled "Proprietary Information" with the RFP name included (Employee Assistance Program RFP).** The envelope must contain a letter from the Proposing firm's legal counsel describing the documents in the envelope, representing in good faith that the information in each document is not "public record" as defined by 29 *Del. C.* § 10002(d), and briefly stating the reasons that each document meets the said definitions. Upon receipt of a proposal accompanied by such a separate, sealed envelope, the State will open the envelope to determine whether the procedure described above has been followed.

Questions of Clarification

All proposing vendors must submit their questions in writing electronically to Finale Uptegrow no later than **October 19, 2009**. The Statewide Benefits Office will then put all **questions received and the responses into one document and send to all vendors who confirmed their intention to bid.**

Modifications to Submitted Proposal

Any changes, amendments, or modifications to a proposal must be made in writing, submitted in the same manner as the original response and conspicuously labeled as a change, amendment or modification to a previously submitted proposal. Changes, amendments or modifications to proposals shall not be accepted or considered after the time and date specified as the deadline for submission of proposals.

Proposal

The proposal shall become part of the contract in the event that the contract is awarded to your organization.

Right of Negotiation

Discussions and negotiations regarding price and other matters may be conducted with vendor(s) who submit proposals determined to be reasonably susceptible of being selected for award, but proposals may be accepted without such discussions. The PRC reserves the right to further clarify and/or negotiate with the proposing firms following completion of the evaluation of proposals but prior to contract execution, if deemed necessary by the PRC and/or the SEBC. The SEBC also reserves the right to move to other proposing firms if negotiations do not lead to a final contract with the initially selected proposing firm. The PRC and/or the SEBC reserves the right to further clarify and/or negotiate with the proposing firm(s) on any matter submitted.

Representation Regarding Contingent Fees

By submission of a proposal, the proposing firm represents that it has not retained any person or agency to solicit or secure a contract for the services described herein upon an agreement or understanding for a commission or a percentage, brokerage, or contingent fee. The SEBC will not pay any brokerage fees for securing or executing any of the services outlined in this RFP. Therefore, all proposed fees must be net of commissions and percentage, contingent, brokerage, service, or finder's fees.

Certification of Independent Price Determination

By submission of a proposal, the proposing firm certifies that the fees submitted in response to the RFP have been arrived at independently and without – for the purpose of restricting competition – any consultation, communication, or agreement with any other proposing firm or competitor relating to those fees, the intention to submit a proposal, or the methods or factors used to calculate the fees proposed.

Cost of Proposal Preparation

All costs incurred by the proposing firm in preparing and delivering its proposal, making on-site presentations, and any subsequent time and travel to meet with the PRC and/or the SEBC regarding its proposal shall be borne at the proposing firm's expense.

Proposal Evaluation

Vendors whose proposals are received by the deadline and meet the "Minimum Requirements" will be evaluated further. All proposals shall be evaluated using the same criteria and scoring process. The following criteria shall be used by the PRC to evaluate proposals.

<u>Evaluation Items</u>	<u>Maximum Points</u>
Overall cost	20
Plan administration capabilities	20
Experience	20
Network Accessibility	20
Performance Guarantees	10
Overall Response to RFP & References	10
Total Points	100

All documentation submitted in response to this RFP and any subsequent requests for information pertaining to this RFP shall become the property of the State of Delaware, Office of Management and Budget and shall not be returned to the proposing firm. All proposing firms should be aware that government solicitations and responses are in the public domain. If the proposing firm wishes, those parts of its proposal dealing with trade secrets and commercial or financial information may remain confidential, but must be stated and clearly marked "private and confidential subject to 29 Del.C. Chapter 100." Such requests will not be binding on the Committee to prevent such a disclosure but may be evaluated under the provisions of 29 Del.C. Chapter 100. Any final decisions regarding disclosure shall be made at the sole discretion of the State.

Right to Consider Historical Information

The PRC and/or the SEBC reserves the right to consider historical information regarding the proposing firm, whether gained from the proposing firm's proposal, question and answer conferences, references, or any other source during the evaluation process.

Right to Reject, Cancel and/or Re-bid

The PRC and/or the SEBC specifically reserve the right to reject any or all proposals received in response to the RFP, cancel the RFP in its entirety, or re-bid the services requested.

State's Right to Award Multiple Source Contracting

Pursuant to 29 Del. C. § 6986, the State of Delaware may award a contract for a particular professional service to two or more vendors if the agency head makes a determination that such an award is in the best interest of the State of Delaware.

Award of Contract

The final award of a contract is subject to approval by the SEBC. The SEBC has the sole right to select the successful vendor(s) for award, to reject any proposal as unsatisfactory or non-responsive, to award a contract to other than the lowest priced proposal, to award multiple contracts, or not to award a contract, as a result of this RFP. Notice in writing to a vendor of the acceptance of its proposal by the SEBC and the subsequent full execution of a written contract will constitute a contract, and no vendor will acquire any legal or equitable rights or privileges until the occurrence of both such events.

RFP Award Notifications

After review by the PRC a recommendation will be made to the SEBC for award of the contract. The contract shall be awarded to the vendor whose proposal is most advantageous, taking into consideration the evaluation factors set forth in the RFP. It should be explicitly noted that the SEBC is not obligated to award the contract to the vendor who submits the lowest bid or the vendor who receives the highest total point score, rather the contract will be awarded to the vendor whose proposal is the most advantageous. The award is subject to the appropriate State of Delaware approvals. After a final selection(s) is made, the winning vendor will be invited to negotiate a contract with the State; remaining vendors will be notified in writing of their selection status.

B. Requirements

The following information will be provided in each proposal in the order listed below. Failure to respond to any request for information may result in rejection of the proposal; at the sole discretion of the SEBC:

1. *Minimum Requirements*

- Provide evidence of a Delaware Business License ☐ **Yes** ☐ **No**
- Provide evidence of professional liability insurance in the amount of \$5,000,000 ☐ **Yes** ☐ **No**
- Services must extend eligible employees in all three Delaware counties. ☐ **Yes** ☐ **No**
- Guaranteed rates for a three year initial term of contract 7/1/2010 – 6/30/2013 ☐ **Yes** ☐ **No**
- Demonstrated experience servicing clients with in excess of 40,000 eligible lives ☐ **Yes** ☐ **No**
- Demonstrated experience servicing clients in the public sector ☐ **Yes** ☐ **No**
- Performance Guarantees with at least 10% of administrative fees at risk ☐ **Yes** ☐ **No**
- Willingness to invoice the State on a monthly basis for services provided the previous month ☐ **Yes** ☐ **No**
- Willingness to agree to the State's right to modify benefits during the contract period ☐ **Yes** ☐ **No**
- Willingness to supply the State with renewal information and/or contract amendments at least 150 days prior to renewal ☐ **Yes** ☐ **No**
- HIPAA, EDI and Privacy compliance on behalf of State plans by compliance dates ☐ **Yes** ☐ **No**
- Significant changes that could negatively impact employees may take effect annually on the anniversary of the plan effective date. Such changes must be communicated in writing:
 - Provide 60 days written notice to employees ☐ **Yes** ☐ **No**
 - Provide 90 days notice to Statewide Benefits Office ☐ **Yes** ☐ **No**
- Provide a sample form of contract and all appendices and/or other documents requiring signature approval (including electronic) by the State of Delaware or its employees with your bid response (**specific legal conditions as outlined in RFP must be included**) ☐ **Yes** ☐ **No**

2. *Service Requirements*

The following are details of services to be provided to the State of Delaware as part of the administrative services agreement.

Member Services Related

- Multi-Lingual support from customer service representatives, communication materials, and website. ☐ **Yes** ☐ **No**
- Respond to employee appeals, complaints or grievances. ☐ **Yes** ☐ **No**
- Toll-free telephone and fax service provided to members. ☐ **Yes** ☐ **No**

Eligibility

- Selected vendor will verify eligibility information by obtaining health identification number from covered individual (no file layout is provided). ☐ **Yes** ☐ **No**

Records

- All information, records, and other data are considered confidential and private. ☐ **Yes** ☐ **No**
- All data records (claims and administration) will be maintained by the administrator but will be the property of the State of Delaware (or another party designated by the State) within 30 days of notification of termination and without cost. ☐ **Yes** ☐ **No**

- You will agree to not use any State of Delaware data as part of larger data gathering or reporting without first obtaining written permission from the State of Delaware. ☐ **Yes** ☐ **No**
- You must allow the State of Delaware or its independent auditors to periodically review all records regarding the payment of claims at no charge to the State of Delaware, except auditor fees. ☐ **Yes** ☐ **No**
- You must maintain confidentiality of all shared employee data in accordance with applicable federal, state and local regulations. ☐ **Yes** ☐ **No**

C. Evaluation Process

All proposals submitted in response to the RFP will be reviewed by the PRC.

PRC

The PRC will make a recommendation regarding the award to the SEBC, who will have final authority, subject to the provisions of this RFP and Title 29 Delaware Chapter 69 Secs. 6981 and 6982 in their entirety to award a contract to successful organizations in the best interests of the State of Delaware.

Proposal Selection Criteria

The PRC shall assign up to the maximum number of points as stated in this Section for each evaluation item to each of the proposing organizations. All assignments of points will be at the sole discretion of the Proposal Review Committee.

The proposals shall contain the essential information for which the award will be made. The information required to be submitted in response to this RFP has been determined by the SEBC and the Proposal Review Committee to be essential for the use by the committee in the evaluation and award process. Therefore, all instructions contained in this RFP will be met in order to qualify as a responsive and responsible contractor and participate in the Proposal Review Committee's consideration for award. Proposals which do not meet or comply with the instructions of this RFP may be considered non-conforming and deemed non-responsive and subject to disqualification at the sole discretion of the Committee.

The PRC reserves the right to:

- Select for contract or negotiations a proposal other than that with lowest costs
- Reject any and all proposals received in response to this RFP
- Make no award or issue a new RFP
- Waive or modify any information, irregularity, or inconsistency in proposal received
- Request modification to proposals from any or all contractors during the review and negotiation
- Negotiate any aspect of the proposals with any organization
- Negotiate with more than one organization at the same time
- Select more than one contractor/vendor to perform the applicable services

D. Contract Conditions

The organization awarded the contract under this RFP will be subject to specific contract provisions as deemed necessary by the SEBC. A Business Associate Agreement will also need to be signed by the successful organization. This document has been attached for your signature.

Term

The term of the contract between the successful organization and the State will be for three (3) years and may be renewed for two (2) additional one-year extensions at the discretion of the SEBC. The contract may be terminated by either party upon 150 days written notice. In the event the successful firm materially breaches any obligation under this Agreement, the State may terminate this Agreement upon thirty (30) days written notice.

Non appropriation

In the event that the General Assembly fails to appropriate the specific funds necessary to continue the contractual agreement, in whole or in part, the agreement shall be terminated, as to any obligation of the State requiring the expenditure of money for which no specific appropriation is available, at the end of the last fiscal year for which no appropriation is available or upon the exhaustion of funds.

Notice

Any notice to the State required under this Agreement will be sent by registered mail to:

Brenda Lakeman, Director
Statewide Benefits Office
The Duncan Center
500 West Loockerman Street, Suite 320
Dover, DE 19904
302-739-8331 (phone) 302-739-8339 (fax)

Formal Contract

The successful organization will promptly execute a contract incorporating the terms of this RFP within thirty **(30) days** after the award of the contract.

Indemnification

By submitting a proposal, the proposing organization agrees that in the event it is awarded a contract, it will indemnify and otherwise hold harmless the State of Delaware, its agents and employees from any and all liability, suits, actions, or claims, together with all costs, expenses for attorney's fees arising out of the organizations, its agents' and employees' performance of work services in connection with the contract, regardless of whether such suits, actions, claims or liabilities are based upon acts or failures to act attributable, in whole or in part, to the State, its employees or agents. **The State of Delaware is prohibited by law from providing indemnity by contract and therefore, the contract will not provide for indemnity by the State.**

Compliance with Laws

In performance of this contract the organization is required to comply with all applicable federal, state, and local laws, ordinance, codes, and regulations. The cost of permits and other relevant costs required in the performance of the contract will be borne by the successful organization. The Laws of the State of Delaware shall apply, except where the Federal Law has precedence. The successful organization consents to jurisdiction and venue in the State of Delaware.

Insurance

The successful organization will maintain professional liability insurance in the amount of \$5,000,000.

Non-discrimination

In performing the services subject to this RFP the organization agrees it will not discriminate against any employee or applicant for the employment because of race, creed, color, sex, or national origin. The successful organization will comply with all federal and state laws, regulations, and policies pertaining to the prevention of discriminatory employment practice. Failure to perform under this provision constitutes a material breach of contract.

Covenant against contingent fees

The successful organization warrants that no person or selling agency has been employed or retained to solicit or secure this contract upon an agreement of understanding for a commission or percentage, brokerage or contingent fee excepting bona-fide employees or bona-fide established commercial or selling agencies maintained by the bidder for the purpose of securing business. For breach or violation of this warranty the State

will have the right to annul the contract without liability or its discretion to deduct for the contract price or otherwise recover the full amount of such commission, percentage, brokerage or contingent fee.

Contract Documents

The RFP and the executed Contract between the State and the successful organization will constitute the Contract between the State and the organization. In the event there is any discrepancy between any of these contract documents, the following order of documents governs so that the former prevails over the latter; Contract and RFP. No other documents will be considered. These documents contain the entire agreement between the State and the organization.

Scope of Agreement

If the scope of agreement of any provision of this Contract is too broad in any respect whatsoever to permit enforcement to its full extent, then such provision will be enforced to the maximum extent by law, and the parties hereto consent and agree that such scope may be judicially modified accordingly and that the whole of such provisions of the contract will not thereby fail, but the scope of such provision will be curtailed only to the extent necessary to conform to the law.

II. QUESTIONNAIRE

Please answer each question clearly and completely, yet concisely.

If you are unable to answer a question, please indicate why you cannot.

If you are unwilling to disclose particular information asked in a question, please indicate why.

Please attach any additional relevant information or documentation that you feel would aid The State in their selection process, and provide specific page number references.

A. MANAGEMENT, EXPERIENCE AND SCOPE OF SERVICE

1. Brief history of your organization including founding date, ownership, current officers and a copy of your most recent financial statement. Indicate the number of years as an external EAP vendor.
2. Your organization's philosophy as it relates to managing employee / dependent psychiatric and chemical dependency problems and ancillary issues, which affect employee productivity and well being.
3. Current staffing and professional qualifications of key operations and program administration personnel. List the total number of full-time and contract employees.
4. Of the employees listed from question #3, how many would be dedicated to the State of Delaware account?
5. An overview of all EAP services which you currently provide. Indicate the services in which you are particularly experienced. Please differentiate between those services which are provided by your employees and those provided by sub-contractors.
6. Assignment of account executive for The State: Specify whether the account executive will have both administrative and clinical responsibilities, and where that person is based.
7. Reference list of three existing EAP client organizations and effective dates of their programs. Please note the number of employees covered and provide contact name and phone number. References should include public sector and/or clients in excess of 30,000 eligible lives.
8. Total number of groups covered under your EAP plans.

9. Total number of employees covered under your EAP plans.
10. Extent of provider/organizational liability.
11. Describe the various methods of contact available to an employee/covered individual (phone, email, instant message, etc).
12. Describe in detail the process from the time a covered individual calls with a problem until a referral for treatment is completed.
13. How do you promote employee awareness of EAP services? Provide copies of your generic communication materials as attachments to your proposal.
14. Please describe examples of wellness workshops and training you have provided to clients.
15. What criteria are used in selection, evaluation and quality control of EAP affiliates and referral resources?
16. Please describe the minimum qualifications of staff who answer calls on your 24-hour line. Please indicate the average experience of staff answering calls during business hours. After hours?
17. What is your “time to answer” standard for the 24-hour line, and how do you monitor this?
18. Where would staff members answering the 800 line be physically located?
19. Describe your procedures for providing consultation to managers and supervisors who request help with an employee problem. How will information be handled when it involves serious job infractions or illegal activity?
20. Please describe follow-up counseling and continued care monitoring for clients post chemical dependency and/or psychiatric treatment, including work re-entry programs.
21. How do you follow up with patients who do not schedule or keep scheduled appointments?
22. Provide a detailed implementation plan with deliverable dates based on a vendor award date of July 2010. Please include identification of all members of your proposed implementation team and confirm assignment of these members will occur no later than April 1, 2010.
23. Please provide a copy of your standard management reporting package. What are your capabilities for capturing and reporting the number of calls to the ‘800’

number and the number of face to face consultations? What are your ad hoc reporting capabilities? For customized reports, what is the typical turnaround time and programming charge?

24. Please provide with your proposal a catalog of all training sessions/workshops available as a part of your offer. Please confirm that your proposal reflects a **minimum** of 225 hours per contract year of service hours to be allocated at the State's discretion (as requested for in Exhibit A.) Indicate your willingness to provide unlimited service hours to the State at no additional charge.
25. Please provide a complete list of all work-life programs and services included under your proposed Per Employee per Month (PEPM) cost.
26. Please confirm your commitment to attend and conduct presentations as requested at annual Benefit Representative meetings and all annual Health Fairs for employees.
27. Please confirm that no part of this service will be outsourced overseas (outside of the United States of America).

B. QUALITY OF SERVICE

1. Detail the criteria used in initial case assessment and referral, including level of care criteria. Process used in selecting providers for referral.
2. Objective measures/criteria and auditing systems used in assessing quality of care provided to employees/dependents by intake team and providers.
3. In-house peer review, supervision, and quality control activities.
4. Professional qualifications and training requirements of intake team and providers.
5. Descriptions of the specialty mix of your provider referral panel in all areas (psych, chemical dependency (CD), legal, financial, etc.).
6. If you have to refer outside of your formal panel of providers, describe your financial arrangement for compensating the provider and any employer liability.
7. Availability and background of medical director or a medical consultant. Indicate what role they play and the number of hours/week of on-site service provided.
8. In-service training programs: content, frequency and materials for intake staff (i.e., personnel who answer 800 telephone lines), assessor, and provider network.
9. Procedures including written documentation requirements, for diagnosis establishment, treatment planning, and case closure for intake team.
10. Philosophy and practice relative to family involvement in assessment and treatment.
11. Philosophy and practice relative to special situations such as AIDS, grief counseling, marital, miscarriage/stillbirth and work trauma counseling.
12. Hold harmless procedures to protect the State against any actions taken by your EAP.
13. Please detail a timetable for a call which encompasses a critical incident

Capabilities Benchmarks

“Yes” or “No” responses are elicited in this section (items 1. through 54.). We encourage you to explain the reasons for “No” answers.

Program Structure

1. Your organization has a written quality improvement (QI) program that outlines the program structure and content.
2. The program description specifies the role, structure, function, and frequency of meetings of the QI Committee and other relevant committees.
3. The annual QI work plan, or schedule of activities, includes the following:
 - a. Objectives, scope, and planned projects or activities for the year;
 - b. Planned monitoring of previously identified issues, including tracking of issues over time; and
 - c. Planned evaluation of the QI program.

Program Operations

4. The quality improvement program is fully operational.
5. Contemporaneous (i.e., created at the time the activity is conducted), dated, and signed minutes reflect all QI Committee decisions and actions.
6. The QI program coordinates with utilization management credentialing, monitoring and resolution of member complaints and appeals, assessment of member satisfaction, and clinical records review.

Accessibility of Services

7. You have established standards for timeliness of routine and urgent care, behavioral healthcare appointments, and access to after-hours care.
8. The organization monitors responsiveness of member services or appointment telephone lines.

Member Satisfaction

9. You assess member satisfaction at least annually by:
 - a. Surveying member satisfaction with the organization's services
 - b. Evaluating patient complaints and appeals
 - c. Evaluating requests to change practitioners and/or facilities

Practice Guidelines

10. The organization adopts and disseminates practice guidelines, practice parameters, consensus statements, or specific criteria for providing acute and chronic behavioral healthcare services.

Continuity and Coordination of Care

11. Your organization updates primary care physicians (PCPs) on diagnosis, treatment, and referral of behavioral healthcare disorders commonly seen in primary care.
12. You have guidelines and procedures to ensure timely access to appointments, referrals, consultations, and medical care.
13. The organization participates with medical care practitioners to reduce inappropriate use of psychopharmacological medications and adverse drug reactions.

Effectiveness of the Quality Improvement (QI) Program

14. Each year there is a written evaluation of the QI program which includes a description of completed and in-process QI activities.
15. Documentation verifies that QI activities have contributed to meaningful improvement in clinical care, including preventive behavioral healthcare services and member services.

Delegation of QI Activity

16. If your firm delegates any QI activities, it has written documentation of the responsibilities of each entity, the delegated activities, frequency of reporting to your organization, and corrective remedies for poor performance.

Access to Care and Services

17. Telephone callers reach a live voice within 20 seconds 24 hours per day/7 days per week
18. Telephone abandonment rates (the percentage of callers who terminate a call before reaching a representative) do not exceed five percent, at any time.
19. Emergent patient visits are available immediately or within one hour of a referral call.
20. Urgent problem visits are available same day or within 24 hours.
21. Non-urgent office visits are offered within 3-5 days.
22. Triage clinicians are trained in one of the core behavioral healthcare disciplines at the Masters level or above (or have equivalent licensure).
23. Triage clinicians are supervised by an experienced behavioral healthcare clinician with a minimum of a Master's degree and five years or more post-Master's clinical experience.

24. The triage function is reviewed and supervised by a board-certified psychiatrist with an active unrestricted license and a minimum of five years or more clinical experience.

Credentialing Process

25. Written policies and procedures address the types of practitioners accepted to participate in the network; including, psychiatrists and/or physicians who are certified in addiction medicine, doctoral and/or master's level psychologists who are state-certified or state-licensed, master's level clinical social workers who are state-certified or state-licensed, and master's level clinical nurse specialists who are nationally- and/or state-licensed to practice independently.
26. At the time of credentialing, your firm verifies at least the following information from primary sources:
 - a. A current valid license to practice as an independent behavioral healthcare practitioner at the highest level certified or approved by the state
 - b. Graduation from an accredited professional school and/or highest training program applicable to the academic degree, discipline, and licensure of the behavioral healthcare practitioner
 - c. Board certification if the practitioner states that he/she is board-certified on the application
 - d. Work history for the past five years
 - e. Current, adequate malpractice insurance according to the organization's policy
 - f. History of professional liability claims which resulted in settlements or judgments paid by or on behalf of the practitioner
27. The applicant completes a credentialing application that includes a statement by the applicant regarding:
 - a. Lack of present illegal drug use
 - b. History of loss of license and/or felony convictions
 - c. History of loss or limitation of privileges or disciplinary activity
28. Prior to making a credentialing decision, your organization receives information appropriate to the practitioner's discipline, including:

- a. Information from the State Board of Licensure or Certification and/or the National Practitioner Data Bank
 - b. Information about sanctions or limitations on licensure from the appropriate state agency of the Federation of State Medical Boards
29. Licensed behavioral health care professional staff conducts an initial visit to the offices of all potential behavioral healthcare practitioners prior to their acceptance for network inclusion.
30. Your firm formally recredentials its practitioners at least every two years, during which it verifies at least the following information from primary sources:
- a. A valid state license to practice
 - b. Board certification (only if the practitioner was due to be recertified)
 - c. Current, adequate malpractice insurance
 - d. History of professional liability claims resulting in settlements or judgments paid by or on behalf of the practitioner
31. The organization incorporates data from the following sources in its recredentialing/decision-making process:
- a. Member complaints
 - b. Information from quality improvement activities
 - c. Utilization management
 - d. Member satisfaction
 - e. Clinical record reviews
 - f. On-site visits conducted by qualified behavioral health professionals
32. The organization confirms that the EAP provider is in good standing with state and federal regulatory bodies.

Members' Rights and Responsibilities

33. Written members' rights policy that states:
- a. Members have a right to receive information about the organization's services, practitioners, clinical guidelines, UM and clinical necessity protocols, and members' rights and responsibilities

- b. Members have a right to be treated with respect and recognition of their dignity and need for privacy
 - c. Members have a right to participate with practitioners in decision making regarding their treatment planning
 - d. Members have a right to voice complaints or appeals about the organization or the care provided
 - e. Members and their families/guardians may have input into the members' rights and responsibilities policies
 - f. Members have a responsibility to follow the plans and instructions for care that they have agreed upon with their practitioners
34. Distribution of policy on members' right and responsibilities to all participating providers and members/guardians.
35. Procedures for registering and responding to oral and written complaints include the following:
- a. Documentation of the substance of complaint and the actions taken
 - b. Investigation of the substance of the complaint, including any aspects of clinical care involved
 - c. Notification to the member of the disposition of the complaint and the right to appeal, as appropriate
 - d. Standards for timeliness in responding to complaints that accommodate the clinical urgency of the situation
36. Would the State be notified of complaints and, if so, how would that process work?
37. Procedures for registering and responding to oral and written appeals include the following:
- Full compliance with the required claims review procedures under ERISA
 - Documentation of the substance of the appeal and the actions taken
 - Full investigation of the substance of the appeal, including any aspects of clinical care involved

- At least one level of review by a panel of individuals who were not involved in the original decision
 - The right of the member (or family member/guardian, if a minor) to appear before the panel
 - Written notifications to the member of the disposition of the appeal and the right to appeal further, if any
 - Standards for timeliness in responding to appeals which accommodate the clinical urgency of the situation
38. Organization provides written information about benefits and charges applicable to the subscriber, including:
- a. The benefits and services that are included and excluded from coverage
 - b. Co-payments and other charges for which the member is responsible
 - c. Any restrictions on benefits that apply to services obtained outside the firm's system or outside the service area
 - d. How to submit a claim for covered services, if applicable
39. Organization provides written information about
- a. How to voice a complaint
 - b. How to appeal a decision that adversely affects the member's coverage, benefits, or relationship to the organization
 - c. How the organization evaluates new technology for inclusion as a covered benefit
40. Information is written in language that is readable, easily understood, and consumer-interested.
41. Information is available, as needed, in the languages of the major populations served.
42. Patients have the opportunity to approve or refuse the release of individually identifiable information by the organization, except when such release is required by law. Please explain the process for this service.
43. Written policies and procedures address the care and treatment of minors as well as adult patients who are unable to exercise rational judgment or give informed consent. In such cases, please detail who would give consent.

C. GEOGRAPIC NETWORK ACCESSIBILITY

1. Please confirm your geographic areas currently serviced as they relate to the State's locations and the maximum accepted driving distance for employees and household members to access your services. Please provide specific information on your office locations (i.e., with full-time staff), and affiliate assessor locations, including the numbers of intake team in these locations.
2. Provide the geographic location of any existing provider networks and their inception date.
3. Means of access, i.e., toll-free number and hours of operation. Specify whether answered by clerical staff or clinician; indicate any degree of automation (i.e., voicemail). If answered by clerical staff, indicate whether clinician is present and hours of availability of on-site clinician. Indicate callback mechanism when clinician is not present.
4. Provide a Geo-Access report based on census information with the following parameters: Urban – 2 providers within 10 miles; Suburban – 2 providers within 10 miles; Rural – 2 providers within 30 miles.

IV. Performance Guarantees

Categories of recommended performance guarantees are set forth below. Performance guarantees for the selected vendor must be comprehensive and have at least 10% of administrative fees put at risk.

Network Maintenance

1. Maintenance of satisfactory number of practitioners/facility providers in all locations.

Member Services

2. Satisfactory result as defined and agreed upon on client-specific member satisfaction survey.

Data Reporting and Analysis

3. Production of utilization reports and data as requested by the State on agreed upon dates.
4. Data Analysis and in-person meeting with the State on a quarterly basis.
5. Timeliness of reporting provided to the State on a quarterly basis.
6. Performance reports provided to the State within 45 days following the end of each contract year.

EAP Program Management

7. 99% of uncomplicated (routine) EAP referrals will have an appointment within 3-5 days.
8. 99% of urgent EAP referrals will be seen same day or within 24 hours.
9. 99% of emergencies are responded to immediately or within 1 hour.
10. Utilization of services will equal or exceed 4% of eligible employees and covered lives.
11. Time to answer will be less than 20 seconds, 24/7.
12. Abandonment rate will be less than 5%.

Final Performance Guarantees will be negotiated during the Finalist process.

V. EXHIBITS

EXHIBIT A

Current Program, Deviations and Financial Proposal

EXHIBIT A

In the “Proposed Plan” column please indicate “confirmed” for each item, or detail your proposed deviations.

Plan Feature	Requested Plan	Proposed Plan
Plan Design		
Assessments	1 to 5 sessions per episode per eligible family member per incident each calendar year	
# of On-site Service Hours	225 minimum per contract year -including but not limited to: <ul style="list-style-type: none"> - Benefit fairs - Employee orientations - Workshops - DOT Supervisory Compliance Training - Supervisory EAP awareness training - Critical Incident Stress Management In the event all service hours are utilized in any contract year, the following contract year’s hours can be accessed. Charges apply to service hours in excess of 675 in a 36 month period, Indicate rate per hour for any additional on site hours.	
Additional Services	Fitness for Duty Evaluations when requested by appropriate Management Indicate charges to provide this service.	
	DOT Substance Abuse Professional Services: includes evaluations, case management, documentation and administrative services required on all DOT violations. Indicate charges to provide these services.	
Availability	24-hour toll-free telephone line, 7 days per week	
	On-line access to work/life topics	
	On-line access to provider locations and contact information	
	Clinician answering phone: <ul style="list-style-type: none"> - During the day, Bachelors or Masters - All other times, Masters 	
	Appointment made by:	

Plan Feature	Requested Plan	Proposed Plan
	- Caller	
	- Intake team	
Basic Services	An Employee Assistance Professional will provide the appropriate number of hours per year of the following basic services:	
	- Professional evaluation (1-5 sessions) and referral if needed to professional counseling	
	- Case management for in- and out-patient treatment	
	- Manager consultations	
	- Supervisory publications emailed quarterly to HR	
	- Employee orientation video	
	- Quarterly impact reports	
	- Monthly newsletters (via email only to approximately 150 designated State Benefits Representatives)	
	- Job Performance Referrals	
	-	
Work-Life Programs	Confirm inclusion of the following programs in your basic services PEPM OR indicate the additional PEPM cost to add it:	
	- Child/Parenting Support Services	
	- Adult/Elder Care Support Services	
	- Financial and Legal Assistance	
	- College Planning	
	- Emergency services	
	- Chronic Condition Support	
	- Diversity Training	
	- Identity Theft	
	- List any additional no cost programs	
Travel Time/Costs	Travel time and costs are built into the service hours and rates proposed.	
Training Opportunities	Catalog the available training topics under unlimited service hours	
Standard Communications Materials		
	- Supervisor Manuals	
	- Employee Brochures and Payroll Stuffers (1 per employee four times per year)	
	- Wallet Cards (2 per employee per year)	
	- Worksite Posters for each site (150 sites)	

Plan Feature	Requested Plan	Proposed Plan
	<ul style="list-style-type: none"> - EAP Video, at no additional cost. - Newsletters or Company Website 	
Management Reports	<p>Confidential utilization reports provided quarterly. These reports should include:</p> <ul style="list-style-type: none"> - Number of employees utilizing program - Fitness for Duty Evaluations/Reviews - Training hours, subject, location, number of employees 	
	- Types of problems identified	
	- Review of EAP program activities	
	- Suggestions for program reinforcement	
Network Site Match-Up	Include full geo-access report as an attachment showing access to 2 providers within 10 miles urban & suburban, and 2 within 30 miles rural.	
Provider Credentials	<ul style="list-style-type: none"> - Appropriate degree from an accredited institution; at least Master's Degree level 	
	- Valid, unrestricted state license/certification	
	- Board Certified or eligible (MD's)	
	- In good standing on the active staff at participating hospitals	
	- Acceptable history of clinical malpractice claims experience	
	- Proof of adequate professional liability coverage	
	- Completion of a signed application and agreement of participant	
	- Face-to-face interviews in over 95% of cases	
Quality Assurance	<p>Quality Assurance Benchmarks:</p> <ul style="list-style-type: none"> - Continuity of Care Study 	
	- Accessibility/Acceptability Study	
	- Performance-Based Referral	
	- Case Conferences	
	- Professional Peer Review	
	- Clinical Audit	
	- Individual Supervisory Review	
	- Telephone Responsiveness Monitoring	
	- Annual Re-Credentialing Process	
	- Client Satisfaction Survey	
Fees		

Plan Feature	Requested Plan	Proposed Plan
	Provide per employee per month (PEPM) rate for:	
➤ Basic Services	Assuming 40,000 employees participate in plan	
Optional Services	List any optional services not included in your proposed cost or service hours, and their respective fees, if any. Indicate no cost if applicable.	
Rate Guarantee	36 months Effective 7/1/2010 – 7/1/2013	

EXHIBIT B

**Current EAP Utilization Reports
Provided Separately**